

REQUEST FOR INFORMATION (RFI)

Department of Health, Family Health Services Division, Women, Infants and Children (WIC)
Services Branch

DESCRIPTION OF SERVICE: WIC has received funds from the United States Department of Agriculture (USDA) for WIC Breastfeeding Peer Counseling. These funds are intended to enable State agencies to implement or maintain an effective breastfeeding peer counselor (BFPC) program. BFPC serve as role models and provide mother-to-mother support which has been proven to increase breastfeeding success.

A. Terms of Fiscal Year 2010 WIC Breastfeeding Peer Counseling Funds:

Required USDA Food and Nutrition Services (FNS) *Loving Support* Model.

The peer counseling program shall be based on research-based components of a successful peer counseling program as identified by FNS (the Loving Support model). The peer counseling program must be consistent with program guidance set forth in *Using Loving Support to Manage Peer Counseling Programs* and *Loving Support through Peer Counseling* training curricula.

B. Duties of BFPCs:

1. Provide breastfeeding information and promote breastfeeding to WIC participants and potential WIC participants. This activity can be performed in a clinic or community setting, during breastfeeding classes, outreach groups and individual sessions.
2. Address specific concerns of expectant mothers and correct misinformation that may prove to be a barrier to breastfeeding.
3. Counsel pregnant women, ideally two or more times during the prenatal period.
4. Counsel women within the first two weeks postpartum, ideally within the first five (5) days, to avoid common breastfeeding problems and help them understand normal breastfeeding situations. Any women with questions or concerns should have a follow up phone call within two days of the original postpartum concern and continue the relation on a regular basis until the new mother does not feel the need for added support.
5. Support women during normal breastfeeding experiences and identify potentially abnormal situations, appropriately referring immediately to the Local Agency Breastfeeding Coordinator (LABFC).
6. Work together with Local Agency (LA) staff as part of the team to efficiently and effectively reach WIC mothers and encourage exclusive breastfeeding initiation and duration. This may include, but is not limited to, inclusion in staff meetings and communications, clinic policy and procedural discussions, BFPC workspace and clinic flow to include BFPCs.

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C. Objectives of BFPCs

1. Increase the rate of exclusively nursing infants at discharge from the hospital/birthing center.
2. Increase the percentage of exclusively nursing infants at six (6) months of age.
3. Increase hospital collaboration to market breastfeeding support.

D. Management of BFPCs

The LA Coordinator, LABFC or Peer Counselor Coordinator is responsible for providing adequate supervision and monitoring of the BFPC through regular systemic contact with the BFPC and regular systemic review of the BFPC contact logs.